LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

Co FEB 10 AM 9: 27
ST. TENTON OF STATE

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared

Julie M. Taylor P.O. Box 7406 Boise, ID 83707-1408				2/8/06			(Mo.) (Day) (Yr.)					
							1	31	06			
Item Totals of all reportal	ole expenditures made of	incurred by	y Lobbyis	t or by	Lobbyist's Emplo	oyer on behalf	of Lobby	ist's Emplo	yer.			
Category of Expenditure Reimbursed Personal Living and Travel Expenses Personal Living Activity	* Total Amount for	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)										
Do Not Have to be Reported	All Employers	Employer No.		. 1 Employer No. 2		Employer No. 3		Employer No. 4				
Entertainment Food and Refreshment	s	s	66.90)_ s_		s		s				
Living Accommodations				_ _								
Advertising				_ _								
Travel				_ _								
Telephone				_ _	· · · · · · · · · · · · · · · · · · ·							
Other Expenses or Services												
Total	\$0.00	s	66.90	<u> </u> s_	0.00	\$	0.00	s	0.00			
*When the number of employer	s you are reporting for requ	ires multiple	L-3 forms	to be file	d a total amount fo	x all cmployers s	hould be e	ntered on Pa	ge i.			
The totals of each expen		dollers (\$50				f public office.		alaia in Con				
- Date	Place		Amo	unt	Names				Ψ			
						Sensitives.						
,												
Continued on allached page(s)											
INS'	TRUCTIONS			Item 3	E	mployer(s) Name	(s) and Ad	dress(es)				
Who should file this form: A 67-6617 Idaho Code.	Any lobbyist registered	under Section	on N	6.1 Blu 300	e Cross of Id 00 E. Pine Av	aho Health enue, Meric	Service lian, ID	, Inc. 83642-5	995			
Filing deadline: Monthly remonth for activities of the part		0) days of d	he N	ło.2								
TO BE FILED WITH: Ben Yaursa Secretary of State					No.3							
Poise	D Box 83720 , ID 83720-0050 -2852 Fax: (208) 334-	2282	١	10.4								

or House	es Bill, Resolution or other bylet was supporting or o	tion, the number of the Senete r legislative activity in which protting.	Code	LEGISLATIVE SUE	JECT	IDENTIFICATION
etse Lobe om table) L	bylet was supporting or o Bill, Resolution or Other	pposing.	مهديرا			INDIA TELECOPITOR
om table) L		Appropriation Bill Number	-	Subject	Code	Subject
	H500 Dental Carrier Taxation		08 09 10 11 12 13 14	and sports Bunking, finance, credit and investments Children, minors, youth, senior citizens Church and raligion Church and raligion Consumer affairs Epology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, textion, revenue, budget, appropriations, bids, fines, famils Government, county Government, foderal Government, special districts	18 19 20 21 22 23 24 25	Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, passins License, passins Liquor Monufacturing, distribution and sorvices Nament researces, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public analysance, workmen's epuperantion Transportation, highways, streets and reads Utilities, communications, helevisions, radio, nawanabus, power, CATV, gas

Lots 10/06